

BEVERLY HEALTHCARE KENOSHA  
1703 60TH ST

KENOSHA 53140 Phone: (262) 658-4125  
Operated from 1/1 To 12/31 Days of Operation: 366  
Operate in Conjunction with Hospital? No  
Number of Beds Set Up and Staffed (12/31/04): 97  
Total Licensed Bed Capacity (12/31/04): 97  
Number of Residents on 12/31/04: 86

Ownership: Corporation  
Highest Level License: Skilled  
Operate in Conjunction with CBRF? No  
Title 18 (Medicare) Certified? Yes  
Title 19 (Medicaid) Certified? Yes  
Average Daily Census: 90

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		26.7
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years		52.3
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	15.1	More Than 4 Years		20.9
Day Services	No	Mental Illness (Org./Psy)	54.7	65 - 74	10.5			-----
Respite Care	No	Mental Illness (Other)	10.5	75 - 84	47.7			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	24.4	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	2.3	95 & Over	2.3	Full-Time Equivalent		
Congregate Meals	No	Cancer	1.2		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	Yes	Fractures	0.0		100.0	(12/31/04)		
Other Meals	No	Cardiovascular	4.7	65 & Over	84.9	-----		
Transportation	No	Cerebrovascular	9.3		-----	RNs		12.0
Referral Service	No	Diabetes	1.2	Gender	%	LPNs		13.8
Other Services	No	Respiratory	0.0		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	16.3	Male	31.4	Aides, & Orderlies		
Mentally Ill	No	-----	-----	Female	68.6			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

## Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care		Managed Care						
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0	6	8.5	140	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	6	7.0
Skilled Care	4	100.0	213	59	83.1	121	0	0.0	0	10	100.0	175	0	0.0	0	1	100.0	210	74	86.0
Intermediate	---	---	---	6	8.5	100	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	6	7.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	4	100.0		71	100.0		0	0.0		10	100.0		0	0.0		1	100.0		86	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
Private Home/No Home Health	11.7	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/With Home Health	0.0	Bathing	0.0	47.7	52.3	86
Other Nursing Homes	5.0	Dressing	11.6	36.0	52.3	86
Acute Care Hospitals	76.7	Transferring	23.3	44.2	32.6	86
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	23.3	31.4	45.3	86
Rehabilitation Hospitals	5.0	Eating	29.1	47.7	23.3	86
Other Locations	1.7	*****				
Total Number of Admissions	60	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	4.7		Receiving Respiratory Care	1.2
Private Home/No Home Health	26.9	Occ/Freq. Incontinent of Bladder	67.4		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	14.9	Occ/Freq. Incontinent of Bowel	69.8		Receiving Suctioning	0.0
Other Nursing Homes	10.4				Receiving Ostomy Care	1.2
Acute Care Hospitals	7.5	Mobility			Receiving Tube Feeding	5.8
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	4.7		Receiving Mechanically Altered Diets	30.2
Rehabilitation Hospitals	0.0					
Other Locations	1.5	Skin Care			Other Resident Characteristics	
Deaths	38.8	With Pressure Sores	2.3		Have Advance Directives	93.0
Total Number of Discharges		With Rashes	11.6		Medications	
(Including Deaths)	67				Receiving Psychoactive Drugs	38.4

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Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

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	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	92.8	88.5	1.05	89.0	1.04	90.5	1.03	88.8	1.04
Current Residents from In-County	54.7	80.0	0.68	81.8	0.67	82.4	0.66	77.4	0.71
Admissions from In-County, Still Residing	18.3	17.8	1.03	19.0	0.96	20.0	0.92	19.4	0.94
Admissions/Average Daily Census	66.7	184.7	0.36	161.4	0.41	156.2	0.43	146.5	0.46
Discharges/Average Daily Census	74.4	188.6	0.39	163.4	0.46	158.4	0.47	148.0	0.50
Discharges To Private Residence/Average Daily Census	31.1	86.2	0.36	78.6	0.40	72.4	0.43	66.9	0.46
Residents Receiving Skilled Care	93.0	95.3	0.98	95.5	0.97	94.7	0.98	89.9	1.03
Residents Aged 65 and Older	84.9	92.4	0.92	93.7	0.91	91.8	0.92	87.9	0.97
Title 19 (Medicaid) Funded Residents	82.6	62.9	1.31	60.6	1.36	62.7	1.32	66.1	1.25
Private Pay Funded Residents	11.6	20.3	0.57	26.1	0.45	23.3	0.50	20.6	0.57
Developmentally Disabled Residents	0.0	0.9	0.00	1.0	0.00	1.1	0.00	6.0	0.00
Mentally Ill Residents	65.1	31.7	2.06	34.4	1.89	37.3	1.75	33.6	1.94
General Medical Service Residents	16.3	21.2	0.77	22.5	0.72	20.4	0.80	21.1	0.77
Impaired ADL (Mean)	62.3	48.6	1.28	48.3	1.29	48.8	1.28	49.4	1.26
Psychological Problems	38.4	56.4	0.68	60.5	0.63	59.4	0.65	57.7	0.67
Nursing Care Required (Mean)	6.5	6.7	0.98	6.8	0.96	6.9	0.95	7.4	0.88